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(Patricia McKenney)

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. First Inventor		CFBF-P02-015
		Patrick Andre
Title	METHODS F HEMOSTAT SELECTIN A	OR DIAGNOSING AND TREATING IC DISORDERS BY MODULATING P-

(Only for new nonprovisional applications under 37 CFR 1.53(b)) EV 324 845 861 US Express Mail Label No. MS Patent Application **APPLICATION ELEMENTS** Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. Specification [Total Pages Х Computer Readable Form (CRF) (preferred arrangement set forth below) Specification Sequence Listing on: Descriptive title of the invention Cross Reference to Related Applications CD-ROM or CD-R (2 copies); or Paper Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, Statements verifying identity of above copies or a computer program tisting appendix Background of the Invention **ACCOMPANYING APPLICATION PARTS** Brief Summary of the Invention - Brief Description of the Drawings (if filed) Assignment Papers (cover sheet & document(s)) - Detailed Description 37 CFR 3.73(b) Statement Power of 10. - Abstract of the Disclosure (when there is an assignee) Attorney X Drawing(s) (35 U.S.C. 113) Total Sheets 11. English Translation Document (if applicable) Information Disclosure Copies of IDS 5. Oath or Declaration [Total Sheets 12. Statement (IDS)/PTO-1449 Citations Newly executed (original or copy) 13. Х Preliminary Amendment Copy from a prior application (37 CFR 1.63(d)) Return Receipt Postcard (MPEP 503) 14. (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) 15. **DELETION OF INVENTOR(S)** (if foreign priority is claimed) Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. named in the prior application, 16. see 37 CFR 1.63(d)(2) and 1.33(b). 17. Other: X Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation-in-part (CIP) of prior application No.: Continuation | X | Divisional 09/860,618 P. Gambel 1644 Prior application information: Examiner Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS х Customer Number: 28120 Correspondence address below **ROPES & GRAY LLP** Name William G. Gosz Address One International Place Citv **Boston** State MA Zip Code 02110-2624 (617) 951-7000 Country US Telephone (617) 951-7050 Registration No. (Attorney/Agent) Name (Print/Type) William G. Gosz 27,787 Sianature February 19, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV324845861US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below

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FEE TRANSMITTAL			Complete if Known					
FEE IRANSIVIIIIAL	Application Number							
for FY 2004	Filing Date			February 19, 2004				
	First Named Inventor			ntor	Patrick Andre			
Effective 10/01/2003, Patent fees are subject to annual revision.	Examiner Name				Not Yet Assigned			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit				N/A			
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Attorn	ey Doo	ket No).	CFBF-P0	2-015	
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (co	ntinued)	
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Check Credit Order Other None 3. ADDITIONAL FEES								
X Deposit Account:		Entity	Cmall	C'-slav				
Deposit	Fee	Fee	Fee	Entity	_	5 D	oto at a	
Number	Code	(\$)	Code	(\$)		Fee Desc	ription	Fee Paid
Deposit Account Ropes & Gray LLP	1051	130	2051	65	Surcharge -	- late filing fe	e or oath	
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge - sheet.	- late provisio	onal filing fee or cover	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		ennoificati-		
					-	specification		
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812		-	•	parte reexamination	
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Examiner ad	ction	f SIR prior to	
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting Examiner a	publication o	f SIR after	
FEE CALCULATION	1251	110	2251	55		or reply within	first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for	or reply within	second month	
Large Entity Small Entity	1253	950	2253	475	Extension fo	or reply within	third month	
Fee Fee Fee Fee Fee PeeDescription Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for	or reply within	fourth month	
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255	1,005	Extension for	or reply within	fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401		Notice of Ap	peal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165		f in support o	f an appeal	
1004 770 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1403 1451	290 1,510	2403 1451	145	Request for	_	lia waa aasaa dia s	
		110	2452	55		evive – unavo	lic use proceeding	
SUBTOTAL (1) (\$) 770.00	1452 1453	1,330	2453	665		evive - uninte		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue	fee (or reissu	ie)	
Extra Fee from Claims below Fee Paid	1502	480	2502	240	Design issu	e fee		
Total Claims -20** = x =	1503	640	2503	320	Plant issue t	fee		
Independent -3** = x = =	1460	130	1460	130	Petitions to	the Commiss	sioner	
Multiple Dependent =	1807	50	1807	50	Processing	fee under 37	CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submission	of Informatio	n Disclosure Stmt	
Fee Fee Fee Fee Fee Description	8021	40	8021	40			ssignment per	
Code (\$) Code (\$) Tee Description							of properties) final rejection	
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 CFR 1.1	(29(a))	•	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		lditional inver 37CFR 1.129		
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for	Continued E	xamination (RCE)	
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for of a design	expedited ex	kamination	
and over original patent	Other	Other fee (specify)						
SUBTOTAL (2) (\$) 0.00 *Reduced by Bas				ling Fee	Paid	SUBTO:	TAL (3) (\$)	0.00
**or number previously paid, if greater, For Reissues, see above								
SUBMITTED BY (Complete (if applicable))								
Name (Print/Type) William G. Gosz		ration No ey/Agent)		,787		Telephone	(617) 951-7617	
Signature William Soz						Date	February 19, 20	004
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Dated: 'LINION

Signature: Kaltin Million

(Patricia McKenney)

Application No. (if known)	Ap	olication	No. ((if known):
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Attorney Docket No.: CFBF-P01-015

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on	February 19, 2004
	Date

Signature

Patricia McKenney

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Application Data Sheet